CLAIMS ONLY

10-1905

Application Number	Filing Date
10-684377	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
(1)			1				51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
(9)			1				59					
10							60					
11							61					
12							62					
(13)			1				63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
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39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			3				Total Indep					
Total Depend			16				Total Depend					
Total Claims			19				Total Claims					